

## **Priving Record Request**

You may use this form to request your driving record. We will mail your record to you or to the individual or company you request below. Mail this request and \$5 for each record in a check or money order payable to the Department of Licensing to:

**Driver Records** Department of Licensing PO Box 9048 Olympia, WA 98507-9048

Please allow two weeks for processing. If you have addition	al questions, contac	ct Customer S	ervice at (360) 902-3900.	
Requestor name (Last, First, Middle Initial)				
Washington driver license number	Date of birth	(Area co	(Area code) Daytime telephone number	
Name of individual or company you want your drive record sent to		k		
Mailing address				
City	State		ZIP code	
Type of record We offer the following types of driving records. Check the box beside the one(s) you need.				
Three-year noncommercial insurance record. Available for underwriting noncommercial motor vehicle policies.				
Three-year commercial insurance record. Available to commercial employers' insurance companies for motor vehicle underwriting purposes only.				
☐ Three-year life insurance record. Available to the life in purposes only. Contains all traffic related commercial ar				
Full employment/commercial record. Available to emeligibility for commercial vehicle operation. Commercial transportation of commodities, merchandise, produce, furaffic related convictions, violations, and collisions. Som	vehicle means any reight, animals or pa	vehicle used p assengers for	orimarily for the hire. The record shows all	
□ Volunteer vanpool driver record. Available to transit a requirements necessary to drive a vanpool vehicle. The collisions. Some convictions remain on record for more	record shows all tra	ine insurance affic related co	and risk management onvictions, violations, and	
── Volunteer for organization driver record. Available to should be permitted to operate a vehicle on public highwork who are physically or mentally disabled. The record should be convictions remain on record for more than five years.	vays to transport inc ws all traffic related	dividuals unde	r age 18, over age 65, or	
School bus driver record. Available to school districts The record shows all traffic related convictions, violation disqualification actions. Some convictions remain on records.	ns, collisions, and su	uspension, rev	ty for school bus operation. vocation, and	
If this request is to be billed and mailed to a school district:				
School district name	Requestor code			
Complete record. Available to the individual named on governmental agencies. The record shows all traffic rela revocation, and disqualification actions.	n the driving record, ated convictions, via	attorneys, law lations, collisi	vand justice agencies, and ons, and suspension,	
I declare under penalty of perjury under the laws of the Sta	ate of Washington th	nat I am the in	dividual named above.	
<b>X</b>				
Date and place signed (Valid for four months)	Signature			